

# United States Bankruptcy Court

Southern District of New York

In re Steve J. Read,  
Debtor

Case No. 10-14134 (JMP)

Chapter 7

## *Amended* SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors also must complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

| NAME OF SCHEDULE  | ATTACHED<br>(YES/NO) | NO. OF SHEETS | ASSETS      | LIABILITIES  | OTHER       |
|---|----------------------|---------------|-------------|--------------|-------------|
| A - Real Property   | No                   |               | \$ 0.00     |              |             |
| B - Personal Property   | No                   |               | \$ 2,270.00 |              |             |
| C - Property Claimed<br>as Exempt   | No                   |               |             |              |             |
| D - Creditors Holding<br>Secured Claims   | No                   |               |             | \$ 0.00      |             |
| E - Creditors Holding Unsecured<br>Priority Claims<br>(Total of Claims on Schedule E) | No                   |               |             | \$ 0.00      |             |
| F - Creditors Holding Unsecured<br>Nonpriority Claims                                 | Yes                  | 6             |             | \$ 45,584.20 |             |
| G - Executory Contracts and<br>Unexpired Leases                                       | No                   |               |             |              |             |
| H - Codebtors   | No                   |               |             |              |             |
| I - Current Income of<br>Individual Debtor(s)   | No                   |               |             |              | \$ 1,296.00 |
| J - Current Expenditures of Individual<br>Debtors(s)                                  | No                   |               |             |              | \$ 1,844.00 |
| TOTAL   |                      |               | \$          | \$           |             |

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# United States Bankruptcy Court

Southern District of New York

In re Steve J. Read,  
Debtor

Case No. 10-14134 (JMP)

Chapter 7

## ~~Amended~~ STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C. § 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

☐ Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

**This information is for statistical purposes only under 28 U.S.C. § 159.**

**Summarize the following types of liabilities, as reported in the Schedules, and total them.**

| Type of Liability   | Amount         |
|---|----------------|
| Domestic Support Obligations (from Schedule E)  | \$ 0.00        |
| Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)  | \$ 0.00        |
| Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed) | \$ 0.00        |
| Student Loan Obligations (from Schedule F)  | \$ 0.00        |
| Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E                   | \$ 0.00        |
| Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)                           | \$ 0.00        |
| <b>TOTAL</b>  | <b>\$ 0.00</b> |

### State the following:

|   |             |
|---|-------------|
| Average Income (from Schedule I, Line 16)   | \$ 1,296.00 |
| Average Expenses (from Schedule J, Line 18)   | \$ 1,274.00 |
| Current Monthly Income (from Form 22A Line 12; <b>OR</b> , Form 22B Line 11; <b>OR</b> , Form 22C Line 20 ) | \$ 1,336.00 |

### State the following:

|  |         |              |
|--|---------|--------------|
| 1. Total from Schedule D, "UNSECURED PORTION, IF ANY" column               |         | \$ 0.00      |
| 2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column.            | \$ 0.00 |              |
| 3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column |         | \$ 0.00      |
| 4. Total from Schedule F   |         | \$ 45,584.20 |
| 5. Total of non-priority unsecured debt (sum of 1, 3, and 4)               |         | \$ 45,584.20 |

In re **Steve J Read**

Case No. 10-14134-Jmp

Debtor

AMENDED

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1067(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided and identify the claim place an "X" in the column labeled "Codebtor." Include the entity on the appropriate

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor." Include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

| CREDITOR'S NAME,<br>MAILING ADDRESS<br>INCLUDING ZIP CODE,<br>AND ACCOUNT NUMBER<br>(See instructions above.)  | C<br>O<br>D<br>E<br>D<br>E<br>B<br>I<br>T<br>O<br>R | H<br>U<br>S<br>B<br>A<br>N<br>D<br>W<br>I<br>F<br>E<br>J<br>O<br>I<br>N<br>T<br>O<br>R<br>C<br>O<br>M<br>M<br>U<br>N<br>I<br>T<br>Y | DATE CLAIM WAS INCURRED AND<br>CONSIDERATION FOR CLAIM. IF CLAIM<br>IS SUBJECT TO SETOFF, SO STATE. | C<br>O<br>N<br>T<br>I<br>N<br>G<br>E<br>N<br>T | U<br>N<br>I<br>Q<br>U<br>E<br>I<br>D<br>E<br>N<br>T<br>I<br>F<br>I<br>C<br>A<br>T<br>I<br>O<br>N | D<br>I<br>S<br>P<br>O<br>S<br>E<br>D | AMOUNT OF CLAIM |
|--|---|---|---|--|--|--------------------------------------|-----------------|
|  |   |   |   |  |  |                                      |                 |
| Account No. xxxxxxxxxxxx3083<br><br>American Express<br>PO Box 297871<br>Fort Lauderdale, FL 33329             |   |   | Opened 8/27/06 Last Active 11/01/08<br>Charge Account   |  |  |                                      | 7,362.52        |
| Account No. xxxxxxxxxxxx1008<br><br>NCO Financial Systems Inc.<br>507 Prudential Road<br>Horsham, PA 19044     |   |   | Representing:<br>American Express   |  |  |                                      | Notice Only     |
| Account No. xxxxxxxxxxxx1008<br><br>NCO Financial Systems, Inc.<br>P.O. Box 15760<br>Wilmington, DE 19850-5760 |   |   | Representing:<br>American Express   |  |  |                                      | Notice Only     |
| Account No. xxxxxxxxxxxx7004<br><br>American Express<br>PO Box 297871<br>Fort Lauderdale, FL 33329-7871        |   |   | Opened 9/01/06 Last Active 11/01/08<br>Charge Account   |  |  |                                      | 5,545.30        |

**5** continuation sheets attached

|                      |           |
|----------------------|-----------|
| Subtotal             | 12,907.82 |
| (Total of this page) |           |

In re **Steve J Read**Case No. **10-14134 - Jmp**

Debtor

**Amended****SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

| CREDITOR'S NAME,<br>MAILING ADDRESS<br>INCLUDING ZIP CODE,<br>AND ACCOUNT NUMBER<br>(See instructions above.) | C<br>O<br>D<br>E<br>D<br>E<br>B<br>T<br>O<br>R | Husband, Wife, Joint, or Community |   | DATE CLAIM WAS INCURRED AND<br>CONSIDERATION FOR CLAIM. IF CLAIM<br>IS SUBJECT TO SETOFF, SO STATE | C<br>O<br>N<br>T<br>I<br>N<br>G<br>E<br>N<br>T | U<br>N<br>L<br>I<br>Q<br>U<br>A<br>T<br>E<br>D | D<br>I<br>S<br>P<br>U<br>T<br>E<br>D | AMOUNT OF CLAIM    |
|---|--|------------------------------------|---|--|--|--|--------------------------------------|--------------------|
|   |  | H                                  | W |  |  |  |                                      |                    |
| Account No. <b>xxxxxxxxxxx7004</b>  |  |                                    |   |  |  |  |                                      |                    |
| <b>Nationwide Credit, Inc.<br/>2015 Vaughn Rd NW, Suite 400<br/>Kennesaw, GA 30144-7802</b>                   |  |                                    |   | <b>Representing:<br/>American Express</b>  |  |  |                                      | <b>Notice Only</b> |
| Account No. <b>HG0827</b>   |  |                                    |   |  |  |  |                                      |                    |
| <b>NCO Financial<br/>PO BOX 15760<br/>Wilmington, DE 19850-5760</b>   |  |                                    |   | <b>Representing:<br/>American Express</b>  |  |  |                                      | <b>Notice Only</b> |
| Account No.   |  |                                    |   |  |  |  |                                      |                    |
| <b>United Recovery Systems<br/>P.O. Box 722910<br/>Houston, TX 77272</b>                                      |  |                                    |   | <b>Representing:<br/>American Express</b>  |  |  |                                      | <b>Notice Only</b> |
| Account No. <b>xxxxxxxxxxx5183</b>  |  |                                    |   | <b>Opened 2/19/79 Last Active 12/01/09<br/>Charge Account</b>                                      |  |  |                                      |                    |
| <b>American Express<br/>PO Box 297871<br/>Fort Lauderdale, FL 33329-7871</b>                                  |  |                                    |   | -  |  |  |                                      | <b>113.00</b>      |
| Account No. <b>xxxxxxxxxxx1008</b>  |  |                                    |   | <b>Charge Account</b>  |  |  |                                      |                    |
| <b>American Express<br/>P.O. Box 360001<br/>Fort Lauderdale, FL 33336-0001</b>                                |  |                                    |   | -  |  |  |                                      | <b>122.71</b>      |

Sheet no. **1** of **5** sheets attached to Schedule of  
Creditors Holding Unsecured Nonpriority ClaimsSubtotal  
(Total of this page) **235.71**

In re Steve J ReadCase No. 10-14134-Jm?

Debtor

**AMENDED**  
**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
 (Continuation Sheet)

| CREDITOR'S NAME,<br>MAILING ADDRESS<br>INCLUDING ZIP CODE,<br>AND ACCOUNT NUMBER<br>(See instructions above.) | C<br>O<br>D<br>E<br>D<br>E<br>B<br>T<br>O<br>R | H<br>W<br>J<br>C | Husband, Wife, Joint, or Community | DATE CLAIM WAS INCURRED AND<br>CONSIDERATION FOR CLAIM. IF CLAIM<br>IS SUBJECT TO SETOFF, SO STATE | C<br>O<br>N<br>T<br>I<br>N<br>G<br>E<br>N<br>T | J<br>U<br>N<br>I<br>T<br>E<br>D<br>S<br>T<br>A<br>T<br>E<br>S | D<br>I<br>S<br>T<br>R<br>I<br>C<br>T | A<br>M<br>O<br>U<br>N<br>T<br>O<br>F<br>C<br>L<br>A<br>I<br>M |
|---|--|------------------|------------------------------------|--|--|---|--------------------------------------|---|
|   |  |                  |                                    |  |  |   |                                      |   |
| Account No. xxxxxxxxxxx1008   |  |                  |                                    |  |  |   |                                      |   |
| NCO Financial Systems Inc<br>507 Prudential Road<br>Horsham, PA 19044   |  |                  |                                    | Representing:<br>American Express  |  |   |                                      | Notice Only   |
| Account No. xxxxxxxxxxx9780   |  |                  |                                    |  |  |   |                                      |   |
| Bank of America<br>PO Box 17054<br>Wilmington, DE 19850   |  |                  |                                    | Opened 8/25/08 Last Active 4/01/09<br>Charge Account   |  |   |                                      | 11,773.00   |
| Account No. 9780  |  |                  |                                    |  |  |   |                                      |   |
| FIA Card Services, N.A.<br>PO Box 15720<br>Wilmington, DE 19850-5720  |  |                  |                                    | Representing:<br>Bank of America   |  |   |                                      | Notice Only   |
| Account No. 9780  |  |                  |                                    |  |  |   |                                      |   |
| Zwicker & Assocs., P.C.<br>PO Box 101145<br>Birmingham, AL 35210  |  |                  |                                    | Representing:<br>Bank of America   |  |   |                                      | Notice Only   |
| Account No. xxxxxxxxxxx0150   |  |                  |                                    |  |  |   |                                      |   |
| Bank of America<br>PO Box 1598<br>Norfolk, VA 23501   |  |                  |                                    | Opened 7/24/06 Last Active 4/01/09<br>Charge Account   |  |   |                                      | 7,793.00  |

Sheet no. 2 of 5 sheets attached to Schedule of  
 Creditors Holding Unsecured Nonpriority Claims

Subtotal  
 (Total of this page) **19,566.00**

In re **Steve J Read**Case No. **10-14134-Jmr**

Debtor

**AMENDED****SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

| CREDITOR'S NAME,<br>MAILING ADDRESS<br>INCLUDING ZIP CODE,<br>AND ACCOUNT NUMBER<br>(See instructions above.) | C<br>O<br>D<br>E<br>B<br>O<br>R | Husband, Wife, Joint, or Community |   | C<br>O<br>N<br>T<br>I<br>N<br>G<br>F<br>N | U<br>N<br>L<br>I<br>Q<br>U<br>I<br>D<br>A<br>T<br>E<br>D | D<br>I<br>S<br>P<br>U<br>T<br>E<br>D | AMOUNT OF CLAIM |
|---|---------------------------------|------------------------------------|---|---|--|--------------------------------------|-----------------|
|   |                                 | H<br>W<br>J<br>C                   | DATE CLAIM WAS INCURRED AND<br>CONSIDERATION FOR CLAIM. IF CLAIM<br>IS SUBJECT TO SETOFF, SO STATE. |   |  |                                      |                 |
| Account No. xxxxxxxxxxxx9187<br><br>Barclays Bank of Delaware<br>125 S West St<br>Wilmington, DE 19801        |                                 |                                    | Opened 7/04/08 Last Active 4/01/09<br>Charge Account  |   |  |                                      | 1,031.78        |
| Account No. xxxxxxxxxxxx9187<br><br>West Asset Management<br>P.O. Box 956842<br>Saint Louis, MO 63195         |                                 |                                    | Representing:<br>Barclays Bank of Delaware  |   |  |                                      | Notice Only     |
| Account No. xxxxxx0897<br><br>Cablevision of Hudson Valley<br>155 N. Plank Rd.<br>Newburgh, NY 12550          |                                 |                                    | Opened 1/27/10 Last Active 3/23/10<br>Cable and Equipment Bill                                      |   |  |                                      | 727.75          |
| Account No. xxxxxx0897<br><br>CBHV<br>PO Box 3495<br>Toledo, OH 43607   |                                 |                                    | Representing:<br>Cablevision of Hudson Valley   |   |  |                                      | Notice Only     |
| Account No. xxxxxxxxxxxx0261<br><br>Chase<br>PO Box 15298<br>Wilmington, DE 19850                             |                                 |                                    | Opened 12/12/08 Last Active 3/01/09<br>Charge Account   |   |  |                                      | 2,639.04        |
| Subtotal<br>(Total of this page)  |                                 |                                    |   |   |  |                                      | 4,398.57        |

Sheet no. 3 of 5 sheets attached to Schedule of  
Creditors Holding Unsecured Nonpriority Claims

In re Steve J ReadCase No. 10-14134 -JMP

Debtor

**AMENDED**  
**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
 (Continuation Sheet)

| CREDITOR'S NAME,<br>MAILING ADDRESS<br>INCLUDING ZIP CODE,<br>AND ACCOUNT NUMBER<br>(See instructions above.) | C<br>O<br>D<br>E<br>D<br>E<br>B<br>T<br>O<br>R | H<br>W<br>J<br>C | Husband, Wife, Joint, or Community | DATE CLAIM WAS INCURRED AND<br>CONSIDERATION FOR CLAIM. IF CLAIM<br>IS SUBJECT TO SETOFF, SO STATE | C<br>O<br>N<br>T<br>I<br>N<br>G<br>U<br>N<br>S<br>E<br>C<br>U<br>R<br>E<br>D | U<br>N<br>S<br>E<br>C<br>U<br>R<br>E<br>D | D<br>E<br>B<br>T<br>O<br>R | AMOUNT OF CLAIM |
|---|--|------------------|------------------------------------|--|--|---|----------------------------|-----------------|
| Account No. xxxxxxxxxxxx7919  |  |                  |                                    |  |  |   |                            |                 |
| Capital Management Services LP<br>726 Exchange Street, Suite 700<br>Buffalo, NY 14210                         |  |                  |                                    | Representing:<br>Chase   |  |   |                            | Notice Only     |
| Account No. xxxxxxxxxxxx5235  |  |                  |                                    | Opened 11/03/08 Last Active 4/01/09<br>Charge Account  |  |   |                            |                 |
| Chase<br>PO Box 15298<br>Wilmington, DE 19850   |  | -                |                                    |  |  |   |                            | 844.00          |
| Account No. xxxxxxxxxxxx7919  |  |                  |                                    | Charge Account   |  |   |                            |                 |
| Chase<br>PO Box 15153<br>Wilmington, DE 19886   |  | -                |                                    |  |  |   |                            | 1,302.04        |
| Account No. 11889496  |  |                  |                                    | Client Reference Number: 1240276<br>Fee from Revenue Recovery Division                             |  |   |                            |                 |
| County of Sacramento<br>Revenue Recovery Division<br>10669 Coloma Road<br>Rancho Cordova, CA 95670            |  | -                |                                    |  |  |   |                            | 2,493.18        |
| Account No. xxxxxxxxxxxx6245  |  |                  |                                    | Opened 10/02/08 Last Active 3/05/09<br>Charge Account  |  |   |                            |                 |
| Discover Fin. Servs. LLC<br>PO Box 15316<br>Wilmington, DE 19850  |  | -                |                                    |  |  |   |                            | 3,581.00        |

Sheet no. 4 of 5 sheets attached to Schedule of  
 Creditors Holding Unsecured Nonpriority Claims

Subtotal  
 (Total of this page) **8,220.22**

In re Steve J ReadCase No. 10-14134-JMP

Debtor

**AMENDED**  
**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
 (Continuation Sheet)

| CREDITOR'S NAME,<br>MAILING ADDRESS<br>INCLUDING ZIP CODE,<br>AND ACCOUNT NUMBER<br>(See instructions above.) | C<br>O<br>D<br>E<br>B<br>O<br>R | H<br>W<br>J<br>C | Husband, Wife, Joint, or Community   | C<br>O<br>N<br>T<br>I<br>N<br>G<br>E<br>N<br>T | U<br>N<br>I<br>Q<br>U<br>I<br>D<br>A<br>T<br>E<br>D | D<br>I<br>S<br>P<br>U<br>T<br>E<br>D | AMOUNT OF CLAIM |
|---|---------------------------------|------------------|--|--|---|--------------------------------------|-----------------|
|   |                                 |                  | DATE CLAIM WAS INCURRED AND<br>CONSIDERATION FOR CLAIM. IF CLAIM<br>IS SUBJECT TO SETOFF, SO STATE |  |   |                                      |                 |
| Account No. xxxxx3021<br><br>T-Mobile<br>PO Box 742596<br>Cincinnati, OH 45274                                |                                 |                  | Cell Phone   |  |   |                                      | 100.00          |
| Account No. xxxxx3021<br><br>HOV Services<br>P.O. Box 5914<br>Bronx, NY 10468-1324                            |                                 |                  | Representing:<br>T-Mobile  |  |   |                                      | Notice Only     |
| Account No. XXXXX9234<br><br>Verizon<br>P.O. Box 15724<br>ALBANY, NY, 12212                                   |                                 |                  | Telephone Line   |  |   |                                      | 155.98          |
| Account No. #16-8702254<br><br>EOS CCA<br>700 LONGWATER DRIVE<br>NOBELL, MA 02061                             |                                 |                  | Representing Verizon   |  |   |                                      | NOTICE only     |
| Account No.   |                                 |                  |  |  |   |                                      |                 |

Sheet no. 5 of 5 sheets attached to Schedule of  
 Creditors Holding Unsecured Nonpriority Claims

Subtotal  
 (Total of this page) 100.00  
 Total  
 (Report on Summary of Schedules) 45584.20  
~~16,428.58~~

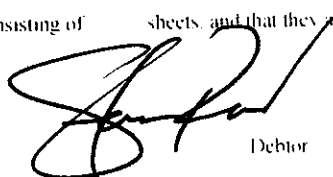


In re Steve J. Read,  
DebtorCase No. 10-14134 (JMP)  
(if known)**Amended**  
**DECLARATION CONCERNING DEBTOR'S SCHEDULES****DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR**

I declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of \_\_\_\_\_ sheets, and that they are true and correct to the best of my knowledge, information, and belief.

Date 08/23/2010

Signature



Debtor

Date \_\_\_\_\_

Signature

(Joint Debtor, if any)

[If joint case, both spouses must sign.]

**DECLARATION AND SIGNATURE OF NON-ATTORNEY BANKRUPTCY PETITION PREPARER (See 11 U.S.C. § 110)**

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h) and 342(b); and (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required by that section.

Printed or Typed Name and Title, if any,  
of Bankruptcy Petition Preparer

Social Security No.  
(Required by 11 U.S.C. § 110)

If the bankruptcy petition preparer is not an individual, state the name, title (if any), address, and social security number of the officer, principal, responsible person, or partner who signs this document.

\_\_\_\_\_

\_\_\_\_\_

Address \_\_\_\_\_

X \_\_\_\_\_  
Signature of Bankruptcy Petition Preparer

Date \_\_\_\_\_

Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document, unless the bankruptcy petition preparer is not an individual.

If more than one person prepared this document, attach additional signed sheets conforming to the appropriate Official Form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure, may result in fines or imprisonment, or both, under 18 U.S.C. § 156.

**DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF A CORPORATION OR PARTNERSHIP**

I, the \_\_\_\_\_ [the president or other officer or an authorized agent of the corporation or a member or an authorized agent of the partnership] of the \_\_\_\_\_ [corporation or partnership] named as debtor in this case, declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of \_\_\_\_\_ sheets (Total shown on summary page plus 1), and that they are true and correct to the best of my knowledge, information, and belief.

Date \_\_\_\_\_

Signature \_\_\_\_\_

[Print or type name of individual signing on behalf of debtor.]

[An individual signing on behalf of a partnership or corporation must indicate position or relationship to debtor.]

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571

**UNITED STATES BANKRUPTCY COURT  
SOUTHERN DISTRICT OF NEW YORK**

-----X  
In re:

STEVE J. READ,

Debtor.  
-----X

:  
: Chapter 7

:  
: Case No. 10-14134  
: X

**NOTICE OF AMENDMENT TO CREDITOR MATRIX**

Steve J. Read hereby notifies the Court that since the time of my initial chapter 7 bankruptcy petition filing on July 30, 2010, an addition creditor and its collection agent has become known to me. In conjunction with my filing of an Amended Schedule F - Creditors Holding Unsecured Nonpriority Claims, I request that the Court updated my creditor matrix by adding the following names:

Verizon  
P.O. Box 15124  
Albany, NY 12212

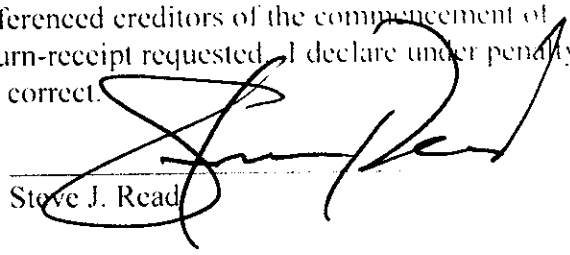
and

EOS CCA  
700 Longwater Drive  
Norwell, MA 02061

On August 23, 2010, I notified both of the above-referenced creditors of the commencement of my chapter 7 bankruptcy case via certified mail, return-receipt requested. I declare under penalty of perjury that the foregoing information is true and correct.

Dated: August 23, 2010

By:

  
Steve J. Read

Steve Read  
Case # 1014134

UNITED STATES POSTAL SERVICE

First-Class Mail®  
Postage & Fees Paid  
Permit No. G-10

• Sender: Please print your name, address, and ZIP+4 in this box •

Steve J. Read  
3043 Villa Avenue  
Apt. 49  
Bronx, NY 10468-1324

324

FILED  
U.S. BANKRUPTCY COURT  
2010 AUG 30 P 12:45  
S.D. OF N.Y.

**SENDER: COMPLETE THIS SECTION**

■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  
■ Print your name and address on the reverse so that we can return the card to you.  
■ Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

EOS CCA  
700 Longwater Drive  
Norwell, MA 02061

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature ☒ Agent ☐ Addressee

B. Received by (Printed Name) ☒ C. Date of Delivery ☒

D. Is delivery address different from item 1? ☐ Yes ☒ No  
If YES, enter delivery address below:

3. Service Type ☐ Certified Mail ☐ Express Mail ☐ Registered Mail ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ C.O.D. ☐ Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (transfer from service label) 7006 2150 0003 8148 1246

PS Form 3811, February 2004 Domestic Return Receipt 102385-02-016-00

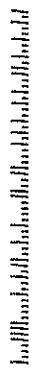
CASE # 1064134  
 STEVE READ

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Print your name and address on the reverse so that we can return the card to you.

Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Verizon  
 P.O. Box 15124  
 Albany, NY 12212

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature *[Signature]* ☐ Agent ☐ Addressee

B. Restricted Delivery ☒ Yes ☐ No

C. Is delivery address different from item 1? ☐ Yes ☐ No

D. If YES, enter delivery address below:

3. Service Type  
☐ Certified Mail ☐ Express Mail  
☐ Registered ☐ Return Receipt for Merchandise  
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (transfer from service label)  
 7006 2150 0003 8148 1239

PS Form 3811, February 2004

10596-10-10-1540